IREDELL COUNTY HEALTH DEPARTMENT

Application For Improvement Permit and/or Authorization To Construct, Existing System Inspection

(THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED - APPLICATION WITH SITE PLAN 60 MONTHS. APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS)

1. APPLICATION FOR: X Improvement Permit ___Authorization To Construct ___BOTH ___Existing System Inspection

2. Page 2: *Site Plan Worksheet* Form MUST Accompany This Application
   The following optional attachments may also be submitted: *Place check ( ) beside whichever is submitted if applicable*
   ___ Survey Plat, Scaled no more than 1 Inch = 60 Feet
   X Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. **Applicant Information:**

Applicant Name	Mailing Address	Home Phone	Work Phone
Crescent Resources	11104 Limehurst Place Charlotte, NC 28278	336-288-7180	same
Owner Name	**Mailing Address**	**Home Phone**	**Work Phone**
Same			

4. **Property Information:**

Street Address: Bayberry Creek Circle — Subdivision Name: The Farms — Section/Phase and Lot Number: 35 / 1

Driving Directions: - Barkley School Road
- TR on McKendree, FL Bayberry Creek
- Lot at end of Circle

****

5. **RESIDENTIAL Site Development Information:** *(Check or Complete ALL that apply)*

X New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System

Maximum Number of Bedrooms 4
Maximum Number of Occupants 8
If Expansion, Current Number of Bedrooms ___

X Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

IF Non-Residential Site Development: Type of Business ___
Square Footage of Building ___
Maximum Number of Employees ___
Maximum Number of Seats ___

****

6. **Proposed Water Supply:**

( ) New Well ( ) Existing Well X Community Well ( ) City Water ( ) Other Public Water

****

7. **Desired Septic System Type:** *(You may rank in order of preference, if any)*

( ) Alternative ( ) Conventional ( ) Innovative X Modified Conventional ( ) Other ___ ( ) No Preference

****

8. **Please Answer The Following To The Best of Your Ability:**

( ) Yes X No Does the site contain any jurisdictional wetlands?
( ) Yes X No Is any non-domestic sewage (i.e. industry) to be generated?
( ) Yes X No Is the site subject to approval by any other public agency?

****

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

). Signature: _____
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

8-31-12
DATE

IREDELL COUNTY HEATLH DEPARTMENT

PAGE 2: *SITE PLAN WORKSHEET*

SEE THE SAMPLE SITE PLAN BELOW. INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!

Place an (X) beside each item as you complete the site plan:

- ✓ Property Line measurements are clearly identified...
- ✓ All proposed structures are indicated...
- ✓ *SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site*
- ✓ Front and side setbacks from property line...
- ✓ Preferred driveway location and configuration, preferred well location...
- ✓ Area you prefer your septic system to be placed...
- ✓ North arrow, or other sufficient indicator of direction...

Circle N/A on the following if appropriate:

- Location of septic systems and wells within 100' of your property... N/A
- Location of easements and rights of ways on your property... N/A
- Location of any designated wetlands on the property... N/A

Signature: _____

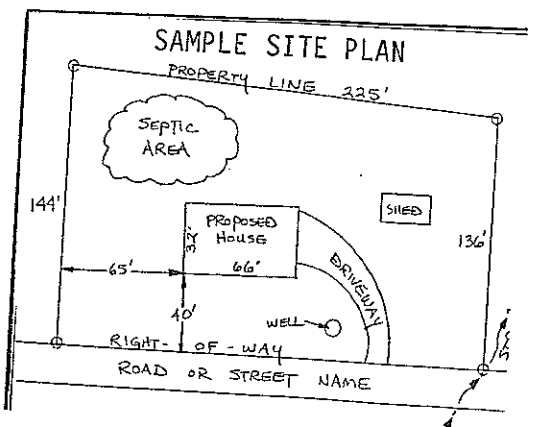
Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

8-31-17
DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN

Well on Lot to be abandoned

See Attached Site Plan



The Farms Lot 351 - Fast Track Septic System Information (8-31-12)

House	
Foundation	**Crawl**
Design Flow (gpd)	**480**
Primary System LTAR (gpd/ft2)	**0.3**
Primary System Type	**25% Reduction**
No. Lines	4 (See Table)
Total Linear Feet	400
Trench Width	3' min.
Trench Spacing	9' min.
Pump Required	Yes
Distribution Device	Pressure Manifold + 2 Drop Boxes
Maintenance Agreement Required	No
Length and Diameter of Supply Pipe	~100' of 2" SCH 40 PVC
Flow Rate through the system	11 gpm
Elevation head	*Approx. 20'
Pressure head	2.0'
Friction head	2.6'
20% Contingency	5
Total Head	29.6'
Pump Requirements	11 gpm @ 30' of head ***To be designed by installer.**
Maximum Dosing Volume	240 gal - approx. 2 doses/day @ design flow
Volume of water pumped per dose	Calculated to specific tank by measure or dealer engineering specifications (1 cubic ft. of water equals 7.48 gal.)
Pump Run per dose	approx. 21 min.
Check Valve	Yes
Siphon Break hole	No
Repair System	**LP PPBPS**
Total Linear Feet	267 Required - 302 shown
Repair Loading Rate	0.3

The Farms Lot 351- Fast Track Septic System Information (8-31-12)

Table: Summary of Primary Nitrification Lines

Line No.	Use	Line Color	System Type	Line Length (Ft.)	Rod Reading (Ft.)
1	Primary	white	25% Reduction	80	4.1
2	Primary	blue	25% Reduction	120	7
3	Primary	white	25% Reduction	100	8.7
4	Primary	red	25% Reduction	100	9.6
				Total System: 400'	

Tank		1500 gal (2 compartment)	
Pump Tank		1500 gal.	14.8**
House	left, rear		11.8

Manifold Information	
Tap Size (In.)	1/2
Tap Material	SCH 80 PVC
No. Taps	2
Barrel Size (In.)	4
Barrel Material	SCH 80 PVC
Flow (gpm)/Tap	5.5

NOTES:

***Elevations must be verified by installer or surveyor at installation**

**** Estimated from contour map**

S&ME, INC.
SITE/SOIL EVALUATION

Project No. 15'84-12-054 **Phone No.** _____ **Date:** 8-20-12
Location ~~Farm 354~~ **Pin** _____ **County:** Caldwell **Property Size** _____

Proposed Facility: 6f Bldg House **Water Supply:** On-Site Well ☐ **Evaluation:** Auger Boring ☐
Described By: RCP Community ☒ Pit ☐
Weather: Warm **Antecedent Moisture** ~~Wet~~ Dry Public ☐ Cut ☒ **Surface Water:** ~~Wet~~

FACTORS	PROFILE 1	PROFILE 2	PROFILE 3	PROFILE 4
Landscape Position %	L	L/H	L	L
Horizon Depth I	0-4	0-8	0-5	0-7
Color Munsell	mbr			
Texture	scl	similar	similar	similar
Structure	wSBk			
Consistence	fr SS/SP			
Boundary				
Horizon Depth II	4-36	8-38	5-31	7-38
Color – Munsell	m		m	
Texture	e		c	similar
Mottles	F yell (10YR)	mk	f yell mas	
Structure	mf SBk	similar	mf SBk	
Consistence	fr SP-SS/SP	fr	fr SP-SS/SP	
	fr SS/SP			
Boundary				
Horizon Depth III	36-60	38-58	31-43	38-53
Color – Munsell	m		m	
Texture	cl		cl	
Mottles	F yel (10YR)	mk	f SAP	f SAP
Structure	wSBk	similar	wf SBk	similar
Consistence	fr SS/SP		fr SS/SP	
Boundary				
Horizon Depth IV				
Color – Munsell				
Texture				
Mottles				
Structure				
Consistence				
Boundary				
Soil Wetness				
Restrictive Horizon				
Saprolite				
PTAR				
Classification	PS-3	PS-3	P-3	PS-3

Approved by CHD 9/12/12

LEGEND

LANDSCAPE POSITION

R	Ridge Interfluve
S	Shoulder
L	Linear Slope
S	Foot Slope
N	Nose Slope
H	Head Slope
Cc	Concave Slope
Cv	Convex Slope
T	Terrace
P	Flood Plain

TEXTURE

s	sand
ls	loamy sand
sl	sandy loam
l	loam
si	silt
sil	silt loam
sicl	silty clay loam
cl	clay loam
scl	sandy clay loam
sc	sandy clay
sic	silty clay
c	clay

CONSISTENCE WET

Ns	non-sticky
Ss	slightly sticky
S	sticky
Vs	very sticky
Np	non-plastic
Sp	slightly plastic
P	plastic
Vp	very plastic

MOIST

vfr	Very friable
fr	friable
fi	firm
vfi	Very firm

STRUCTURE

sg	single grain
m	massive
cr	crumb
gr	granular
sab	subangular blocky
ab	angular blocky
pl	platy
pr	prismatic

S&ME, INC.
SITE/SOIL EVALUATION

Project No. 1584-12-088 **Phone No.** _____ **Date:** 8-20-12
Location Farm 351 **Pin** _____ **County:** Pamlico **Property Size** _____

Proposed Facility: 4 BR Home **Water Supply:** On-Site Well ☐ Community ☒ Public ☐ **Evaluation:** Auger Boring ☐ Pit ☒ Cut ☐

Described By: RSD
Weather: Warm **Antecedent Moisture** Avg's to **Surface Water:** —

FACTORS	PROFILE S-	PROFILE	PROFILE	PROFILE
Landscape Position %	L/H			
Horizon Depth I	0-27			
Color Munsell	10yr 5/1			
Texture	scl/cl			
Structure	wsbk fri ssbk			
Consistence				
Boundary				
Horizon Depth II	27-57			
Color – Munsell	2.5y 6/2			
Texture	cl/scl			
Mottles	f d wk 10yr 5/6			
Structure	m-wk sbk			
Consistence	fi; sp - s ssbk			
Boundary				
Horizon Depth III				
Color – Munsell				
Texture				
Mottles				
Structure				
Consistence				
Boundary				
Horizon Depth IV				
Color – Munsell				
Texture				
Mottles				
Structure				
Consistence				
Boundary				
Soil Wetness				
Restrictive Horizon				
Saprolite				
LTAR				
Classification	P's 3			

LEGEND

LANDSCAPE POSITION

R	Ridge Interfluve
S	Shoulder
L	Linear Slope
S	Foot Slope
N	Nose Slope
H	Head Slope
Cc	Concave Slope
Cv	Convex Slope
T	Terrace
P	Flood Plain

TEXTURE

s	sand
ls	loamy sand
sl	sandy loam
l	loam
si	silt
sil	silt loam
sicl	silty clay loam
cl	clay loam
scl	sandy clay loam
sc	sandy clay
sic	silty clay
c	clay

CONSISTENCE WET

Ns	non-sticky
Ss	slightly sticky
S	sticky
Vs	very sticky
Np	non-plastic
Sp	slightly plastic
P	plastic
Vp	very plastic

MOIST

vfr	Very friable
fr	friable
fi	firm
vfi	Very firm

STRUCTURE

sg	single grain
m	massive
cr	crumb
gr	granular
sab	subangular blocky
ab	angular blocky
pl	platy
pr	prismatic

Iredell County
Planning & Enforcement
349 N. Center St. PO Box 788
Statesville, NC 28687
704-878-3113

Zoning Permit

Permit Number: 174717ZO

Printed: 9/5/2012

Master #: 174717

Associated Permits:
174717ZO Zoning

Applicant

Name: S&ME INC. ENGINEERING (Paul Penning **Phone:** 704-662-8625
Address: 385 Timber Road Suite 104
Mooresville, NC 28115

Parcel

Parcel Number: 4626261675.351
Address: 000 Bayberry Creek Cir.
MOORESVILLE, NC 28117
Subdivision: The Farms Phase 3
Zoning: RA
Township: 0600
Area:
Lot(s): 351
Directions to Parcel: brawley school road, tr on mckendree, tl baryberry creek, lot at end of circle

Owners

Name: The Farms, LLC
Address: 2214 Brawley School Rd
Mooresville, NC 28115

Contractors

Contractor Type: Enviromental Services
Name: S&ME INC. ENGINEERING (Paul Penninger) **Phone:** 704-662-8625
Address: 385 Timber Road Suite 104
Mooresville, NC 28115

Fees and Receipts:

Number	Description	Amount
FEE-264143-07	Zoning - Permit Application	$75.00
FEE-264144-07	Technology Fee - Planning	$2.25
FEE-264145-07	Environmental Health - Gravity - Fast Track	$350.00

$ PAID Ck# 13699 9-5-12

Iredell County
Planning & Enforcement
349 N. Center St. PO Box 788
Statesville, NC 28687
704-878-3113

Zoning Permit

Permit Number: 174717ZO

Printed: 6/6/2013

Master #: 174717

Associated Permits:
174717ZO Zoning

Applicant

Name: HARRIS CONSTRUCTION GROUP
Address: 9935 D RAE ROAD SUITE 210
CHARLOTTE, NC 28277
Phone: 704-295-0094

Parcel

Parcel Number: 4626261675.000
Address: 400 Bayberry Creek Cir.
MOORESVILLE, NC 28117
Subdivision: The Farms
Zoning: RA
Township: 0600
Area:
Lot(s): 351
Directions to Parcel: brawley school road, tr on mckendree, tl baryberry creek, lot at end of circle

Owners

Name: HARRIS CONSTRUCTION GROUP
Address: 9935 D RAE ROAD SUITE 210
CHARLOTTE, NC 28277
Phone: 704-295-0094

Contractors

Contractor Type: Building
Name: Harris Construction Group
Address: 9935-D Rea Rd, #210
Charlotte, NC 28277
Phone: 704-295-0094

Fees and Receipts:

Number	Description	Amount
FEE-286905-07	Zoning - Permit Application	$75.00
FEE-286908-07	Technology Fee - Planning	$2.25
	Total Fees:	**$77.25**

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION

~~PLAT ON FILE~~ ~~New Septic~~ 06-06-13 MS

Application for IMPROVEMENT PERMIT, AUTHORIZATION TO CONSTRUCT, or EXISTING SYSTEM INSPECTION

(THE ABOVE PERMIT DOCUMENTS WILL BECOME INVALID IF INFORMATION PROVIDED ON THIS APPLICATION IS FALSIFIED OR CHANGED, OR IF THE SITE IS ALTERED. THE IMPROVEMENT PERMIT IS VALID FOR EITHER 60 MONTHS OR WITHOUT EXPIRATION DEPENDING UPON DOCUMENTATION SUBMITTED - APPLICATION WITH SITE PLAN 60 MONTHS, APPLICATION WITH COMPLETE, SCALED PLAT WITHOUT EXPIRATION. SEE 15A NCAC 18A .1937(f) FOR DETAILS)

1. APPLICATION FOR: (X) Improvement Permit (✓) Authorization To Construct ___ BOTH ___ Existing System Inspection

2. Page 2: *Site Plan Worksheet* Form MUST Accompany This Application

The following optional attachments may also be submitted: *Place check ( ) beside whichever is submitted if applicable*

___ Survey Plat, Scaled no more than 1 Inch = 60 Feet

(X) Custom Site Plan, Scaled no more than 1 Inch = 60 Feet

3. Applicant Information:

Applicant Name	Mailing Address	Home Phone #	Alternate Phone #
Harris Construction Group, LLC	9935-D Rea Rd Ste 210 Charlotte, NC 28277	704-295-0094	704-202-3797

Owner Name	Mailing Address	Home Phone #	Alternate Phone #
Same			

4. Property Information:

400 Bayberry Circle Ct. — Street Address

The Farms — Subdivision Name

Lot 351 — Section/Phase and Lot Number

Driving Directions: Williamson Rd, Left on Brawley School, Left on Kemp, right Grove Creek, Left on Bayberry Circle

5. RESIDENTIAL Site Development Information: *(Check or Complete ALL that apply)*

(X) New, Single Family Residence
( ) New, Multi-Family Residence
( ) Expansion of Existing Septic System
( ) Repair To Failing Septic System due to ___
( ) Other ___

Maximum Number of Bedrooms 4
Maximum Number of Occupants ___
If Expansion, Current Number of Bedrooms ___

(X) Crawl Space Foundation?
( ) Concrete Slab Foundation?
( ) Basement w/Plumbing?
( ) Basement w/out Plumbing?

IF Non-Residential Site Development:
Type of Business ___
Square Footage of Building ___
Maximum Number of Employees ___
Maximum Number of Seats ___

6. Proposed Water Supply:

( ) New Well ( ) Existing Well (X) Community Well ( ) City Water ( ) Other Public Water

7. Desired Septic System Type: *(You may rank in order of preference, if any)*

( ) Alternative (X) Conventional ( ) Innovative ( ) Modified Conventional ( ) Other ___ ( ) No Preference

8. Please Answer The Following To The Best of Your Ability:

( ) Yes (X) No Does the site contain any jurisdictional wetlands?
( ) Yes (X) No Is any non-domestic sewage (i.e. industry) to be generated?
( ) Yes (X) No Is the site subject to approval by any other public agency?

I have read this application and certify that the information provided herein is true, complete, and correct. Authorized county and state officials are granted right of entry to conduct necessary inspections to determine compliance with applicable laws and rules. I understand that I am solely responsible for the proper identification and labeling of all property lines and corners and making the site accessible so that a complete site evaluation can be performed.

Signature: ___

Property owner or owner's legal representative signature (SIGNATURE REQUIRED)

6/6/2013
DATE

IREDELL COUNTY HEATLH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
PAGE 2: *SITE PLAN WORKSHEET*

SEE THE "SAMPLE SITE PLAN" BELOW. *INCOMPLETE SITE PLANS WILL BE RETURNED TO YOU FOR COMPLETION AND MAY RESULT IN A DELAY IN THE ISSUANCE OF YOUR SEPTIC SYSTEM PERMIT!!!*

Place an (X) beside each item as you complete the site plan:

- X Property Line measurements are clearly identified...
- X All proposed structures are indicated...
  SHOW: proposed house or business footprint, wells, water lines, patios, pools and decks, and any other item that will occupy space on the site
- X Front and side setbacks from property line...
- X Preferred driveway location and configuration, preferred well location...
- X Area you prefer your septic system to be placed...
- X North arrow, or other sufficient indicator of direction...

Circle N/A on the following if appropriate:

- ____ Location of septic systems and wells within 100' of your property... (N/A)
- ____ Location of easements and rights of ways on your property... (N/A)
- ____ Location of any designated wetlands on the property... (N/A)

Signature: _____
REQUIRED property owner or owner's legal representative signature.

6/6/2013
DATE

USE THIS SPACE TO DRAW YOUR SITE PLAN

see attached site plan

WELL ABANDONMENT RECORD

This form can be used for single or multiple wells

1. Well Contractor Information:

Michael Brook
Well Contractor Name (or well owner personally abandoning well on his/her property)

4210C
NC Well Contractor Certification Number

DC Mullis Well Drilling
Company Name

2. Well Construction Permit #: 174717
List all applicable well construction permits (i.e. County, State, Variance, etc.) if known

3. Well use (check well use):

Water Supply Well:	
☐Agricultural	☒Municipal/Public
☐Geothermal (Heating/Cooling Supply)	☐Residential Water Supply (single)
☐Industrial/Commercial	☐Residential Water Supply (shared)
☐Irrigation	
Non-Water Supply Well:	
☐Monitoring	☐Recovery
Injection Well:	
☐Aquifer Recharge	☐Groundwater Remediation
☐Aquifer Storage and Recovery	☐Salinity Barrier
☐Aquifer Test	☐Stormwater Drainage
☐Experimental Technology	☐Subsidence Control
☐Geothermal (Closed Loop)	☐Tracer
☐Geothermal (Heating/Cooling Return)	☐Other (explain under 7g)

4. Date well(s) abandoned: 5-14-13

5a. Well location:

HAm's Const. Group
Facility/Owner Name

Facility ID# (if applicable)

Lot 351 Bayberry Creek Circle Mooresville
Physical Address, City, and Zip

Iredell
County

Parcel Identification No. (PIN)

5b. Latitude and longitude in degrees/minutes/seconds or decimal degrees:
(if well field, one lat/long is sufficient)

35.56617 N 80.94327 W

CONSTRUCTION DETAILS OF WELL(S) BEING ABANDONED
Attach well construction record(s) if available. For multiple injection or non-water supply wells ONLY with the same construction/abandonment, you can submit one form.

6a. Well ID#: _____

6b. Total well depth: 800 (ft.)

6c. Borehole diameter: 8 (in.)

6d. Water level below ground surface: 35 (ft.)

6e. Outer casing length (if known): Unknown (ft.)

6f. Inner casing/tubing length (if known): ——— (ft.)

6g. Screen length (if known): ——— (ft.)

For Internal Use ONLY:

WELL ABANDONMENT DETAILS

7a. Number of wells being abandoned: 1
For multiple injection or non-water supply wells ONLY with the same construction/abandonment, you can submit one form.

7b. Approximate volume of water remaining in well(s): 2601 (gal.)

FOR WATER SUPPLY WELLS ONLY:

7c. Type of disinfectant used: HTH

7d. Amount of disinfectant used: 51lbs

7e. Sealing materials used (check all that apply):

☐ Neat Cement Grout	☐ Bentonite Chips or Pellets
☐ Sand Cement Grout	☐ Dry Clay
☒ Concrete Grout	☐ Drill Cuttings
☐ Specialty Grout	☐ Gravel
☐ Bentonite Slurry	☐ Other (explain under 7g)

7f. For each material selected above, provide amount of materials used:

9 yards

7g. Provide a brief description of the abandonment procedure:

Air line down to 500ft. Poured with concrete truck to surface 2ft. below.

8. Certification:

Signature of Certified Well Contractor or Well Owner

5-14-13
Date

By signing this form, I hereby certify that the well(s) was (were) abandoned in accordance with 15A NCAC 02C .0100 or 2C .0200 Well Construction Standards and that a copy of this record has been provided to the well owner.

9. Site diagram or additional well details:
You may use the back of this page to provide additional well site details or well abandonment details. You may also attach additional pages if necessary.

SUBMITTAL INSTRUCTIONS

10a. For All Wells: Submit this form within 30 days of completion of well abandonment to the following:

Division of Water Quality, Information Processing Unit,
1617 Mail Service Center, Raleigh, NC 27699-1617

10b. For Injection Wells: In addition to sending the form to the address in 10a above, also submit one copy of this form within 30 days of completion of well abandonment to the following:

Division of Water Quality, Underground Injection Control Program,
1636 Mail Service Center, Raleigh, NC 27699-1636

10c. For Water Supply & Injection Wells: In addition to sending the form to the address(es) above, also submit one copy of this form within 30 days of completion of well abandonment to the county health department of the county where abandoned.